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AUTHOR	Wolfenden, Deborah Parker
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ABSTRACT

This monograph, intended for Maine educators, presents basic information in question-and-answer format on assistive technology (AT) devices and services and the role of AT in delivering appropriate education to children with disabilities in the least restrictive environment. Questions and answers are divided into the following topics: (1) definitions, relevant provisions of the Individuals with Disabilities Education Act, the Americans with Disabilities Act, and Section 504 of the Rehabilitation Act, and the role of the Individualized Education Program; (2) family involvement, including how and when families are involved, ways that schools and parents can work in partnership to ensure provision of AT devices and services, and responsibilities of parents, students, and teachers in maintenance and repair of AT; (3) assessment and evaluation of AT and components of an AT evaluation; (4) training and professional development on how to use the assistive technology devices; and (5) funding sources. Also provided are sample questions to ask in device assessment. These questions consider choice options, characteristics and features, availability and purchase, examination and use, wear and maintenance, technical features, and transportation of the device. (CR)

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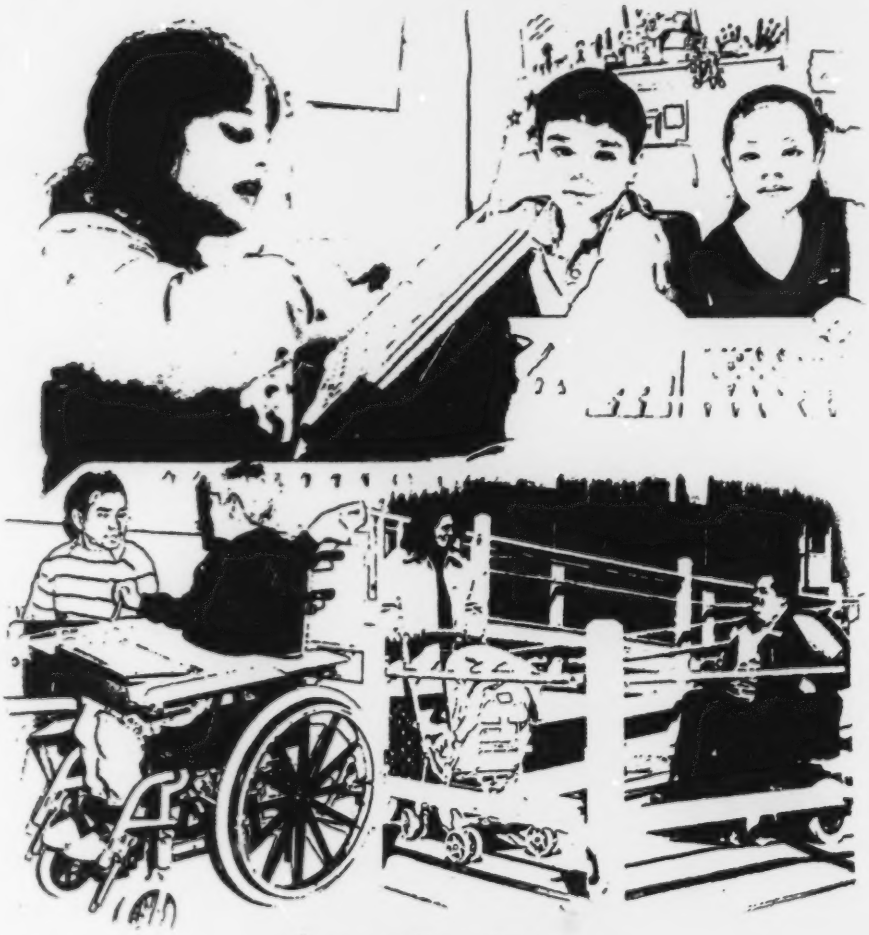
Commonly Asked Questions About Assistive Technology Devices and Services: An Educators', Parents' and Advocates' Guide



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Researched and Written by:
Deborah Parker Wolfenden, M.Ed., CCC-SLP
Funding and Policy Consultant
MaineCITE Project

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Important Notes About This Guide

This guide has been divided by topical question areas. The Table of Contents lists the general topic areas with the corresponding page ranges which are addressed in this book. Once you have determined which topic area you want to know more about, simply go to that section. Each section contains a complete list of specific questions and answers with corresponding page numbers.

In addition, the reader should note that the information contained in this booklet is designed primarily for children ages 3 to 21 years who are eligible for services and/or programs under Part B of the Individuals with Disabilities Education Act (IDEA). IDEA is designed, however, to be comprehensive in nature and contains statutory information for children birth to two in Part C. The reader should note that most of the information contained in this guide would pertain to children who are eligible to receive services from either Part B or Part C. It is acknowledged, however, that there are subtle differences between Part B and Part C and the reader would be well advised to check specific statutory references for children eligible to receive services through Part C of IDEA.

It is our intention that this guide will assist families, teachers, related service personnel and advocates in obtaining appropriate and necessary assistive technology devices and services for the children they serve. If you find information which is no longer accurate, please call or write and give us the corrected information.

Finally, we want to know if this booklet has been helpful. If you would like additional copies, want to share your comments about the guide, or give us more current information, please contact us at:

MaineCITE Coordinating Center
46 University Drive
Augusta, Maine 04330
207 621-3195 (Voice)
207 621-3193 (Fax)
207 621- 3482 (TTY)
http://www.MaineCITE.org

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Western Regional Resource Center, Eugene, Oregon
Maine Center for Assistive Technology and Software, University of Southern Maine

Introduction

The impacts of assistive technology (AT) are multidimensional, multifaceted and cross every domain of life. Perhaps Morris and Button (1994) answered the question best when they reported in "Access to Assistive Technology: A Public Policy Status Report" that "for some individuals with disabilities, assistive technology is a necessity that enables them to engage in or perform many tasks...to have greater control over their own lives; participate in and contribute more fully in activities in their home, school, and work environments, and in their communities; interact to a greater extent with non-disabled individuals and otherwise benefit from opportunities that are taken for granted by individuals who do not have disabilitiesæ (P.L. 103-218, Section 3).

The Individuals with Disabilities Education Act Amendments of 1997 (IDEA) (P.L. 105-17) is the federal law that mandates a free appropriate public education (FAPE) in the least restrictive environment (LRE) to children and youth with disabilities. IDEA requires special education services be provided for children and youth with disabilities aged 3 to 21 and early intervention services for children with disabilities birth through 2.

The Assistive Technology Act of 1998 (ATA) recognizes the importance of assistive technology in the lives of individuals with disabilities. Assistive Technology is defined as "any item, piece of equipment, or product system, whether acquired commercially modified or customized, that is used to increase, maintain, or improve the functional capabilities of individuals with disabilities" (P.L. 105-394, Section 3). Identical definitions of AT are found in both the IDEA and ATA. The only exception is the use of "child" in IDEA and "individual" in the ATA.

Two other important pieces of federal legislation include the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973. The ADA is legislation that prohibits discrimination against individuals with disabilities in the areas of employment, public services, public accommodations, transportation, and communication. Section 504 of the Rehabilitation Act of 1973 requires that general education programs provide nondiscriminatory access to all children with disabilities.

This document is an updated and revised version of the original document published in 1995. It is intended for administrators, educators, families, related service providers, and advocates as they implement the 1997 Amendments to IDEA and the Maine Special Education Regulations, Chapter 101 and Chapter 180. This

publication highlights some current practices utilized by the educational community, as educators, families, and communities forge forward in building resources and capacity for the provision of assistive technology devices and services.

Assistive technology is of critical importance as Maine implements the Learning Results. The Maine Learning Results set high expectations for all students and describe what all students should know and be able to do. Congressional intent as stated in IDEA 1997 is to have our children leave the educational system ready for employment and independent life.

All decisions by the Pupil Evaluation Team and the Early Childhood Team relating to assistive technology devices and services must be made on a case-by-case basis as part of each child's Individualized Education Program (IEP) or Individualized Family Service Plan (IFSP). It is hoped that this material will assist educators, families, related service providers and advocates to better understand assistive technology and its role in providing free appropriate education to children with disabilities in the least restrictive environment.

General Assistive Technology Questions

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Question: What is the role of the Maine Department of Education in assuring that assistive technology needs of Maine children are met?

Response: The Department of Education is primarily responsible for the provision of information, technical assistance, support and monitoring for the implementation of the AT requirements contained in the Individuals with Disabilities Education Act (IDEA). The department's Office of Special Services is responsible for leadership, administration and support regarding the implementation of IDEA.

Examples of current Department of Education involvement in the area of assistive technology include but are not limited to:

- Maintaining a general technology home page with links to assistive technology and other technology initiatives around Maine;
- Integrating assistive technology into a variety of general technology initiatives being developed for all educators in Maine (i.e., assistive technology as part of the technology survey, designing and developing accessible web pages); and
- Negotiation of requests for proposals (RFP) with understanding of applicable laws and regulations;
- Supporting development of assistive technology resources through contracts with Maine's universities and other entities that support the inclusion of children with disabilities, in the design and development of the Maine Learning Results;
- Administering the MaineCITE Project;
- Supporting the work of the Department of Education in the development of the Maine Educational Assessment, and the Maine Learning Results particularly in the areas of accommodations and alternative assessments;
- Providing compliance monitoring of the 1997 Amendments of the Individuals with Disabilities Education Act (IDEA); and
- Providing information regarding the student's Due Process Rights to School Administrative Units (SAU) and families.

Question: What is the role of the MaineCITE Project?

Response: MaineCITE supports the Maine Department of Education in providing technical assistance and information to local school districts and the public. MaineCITE staff take an active role in reviewing, commenting on and assisting in implementation of Maine's laws and regulations regarding access, evaluation, and acquisition of AT devices and services, electronic and information technologies and universal design. The Maine Department of Education recognizes that a long range planning effort is important to ensure the creation of cost-effective and educationally appropriate model forms, policies, practices and procedures that incorporate assistive technology.

A major responsibility of the MaineCITE Project, therefore, centers on the provision of general information and technical assistance to the Maine Department of Education, local SAUs, parents and the general public. Examples of the types of technical assistance and information which MaineCITE provides include but are not limited to:

- Developing materials relating to assistive technology;
- Maintaining a Web site solely devoted to assistive technology;
- Providing assistance with funding and policy development; and
- Providing training in policy, funding sources, funding justifications, advocacy, best practice standards, etc. in the area of assistive technology.

Question: What are the roles and responsibilities of local school districts and the regional Child Development Services site?

Response: The roles of the local school district/regional Child Development Services (CDS) site are to utilize the Individual Education Program (IEP) or Individualized Family Service Plan (IFSP) development process to determine individual assistive technology needs, and then to provide assistive technology devices and services set forth in each IEP/IFSP. In order to do this, local districts and regional CDS sites may develop specific procedures for addressing the following issues: the need for staff and user training, the development of IEPs or IFSPs, the acquisition and maintenance of assistive technology devices, the provision of assistive technol-

ogy services and the identification and access of other available funding sources (i.e., Medicaid, private insurance, Vocational Rehabilitation).

If there are questions regarding the availability of and access to AT devices and services for a particular child, you should contact the local administrator of special education or the regional CDS director. He or she will be able to explain the policies and procedures which have been developed in the child's School Administrative Unit (SAU) or regional CDS site.

Question: What is an assistive technology device?

Response: The term "assistive technology device" as used in the Maine Special Education Regulations means "any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of children with disabilities" (Chapter 101, § 2.2 and Chapter 180, § 3A and 3AA).

Question: What is an assistive technology service?

Response: The term assistive technology service as used in the Maine Special Education Regulations means "any service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device." The term includes:

A) The evaluation of the needs of a child with a disability, including a functional evaluation of the child in the child's customary environment;

B) Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by children with disabilities;

C) Selecting, designing, fitting, customizing, adapting, applying, retaining, repairing, or replacing assistive technology devices;

D) Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;

E) Training or technical assistance for a child with a disability or, if appropriate, that child's family; and

F) Training or technical assistance for professionals (including individuals providing education or rehabilitation services), employers, or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of children with disabilities (Chapter 101, § 2.3 and Chapter 180, § 3A and 3AA).

Question: What are the provisions of the Individuals with Disabilities Education Act (IDEA) that support funding and/or provision of assistive technology devices and/or services?

Response: The Individuals with Disabilities Education Act contains six programs, services and administrative sections that can be viewed as supporting potential funding of assistive technology. Each of these terms is described below.

1. Free Education

The "free" in free appropriate public education (FAPE) is significant to children with disabilities who may require assistive technology. As stated in the statute and regulations, all aspects of the special education and related services provided to a child with disabilities must be "at no cost to the parents." This "at no cost" rule prohibits regional CDS sites and school districts from excluding assistive technology devices and/or services on the Individual Education Program (IEP) or Individualized Family Service Plan (IFSP) based on its expense. The only time "cost" can be a consideration is where two equal alternatives exist that would each enable the child to receive an "appropriate" education. In this case, the school or site may choose the less expensive option (See Chapter 101, §1.3 Free Appropriate Public Education, §18.8 User of Third Party Funding, See Chapter 180, § 8 re: Third Party Liability and "At No Cost").

2. Special Education

"Special education" is defined in the Individuals with Disabilities Education Act and in Maine Special Education Regulations as:

"Specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including

i) Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and

ii) Instruction in physical education" (20 U.S.C.1401(25); 34 C.F.R. Section 300.26).

The most important part of this definition is that the instruction is "specially designed" to "meet the unique needs" of a child. Based on the individual child's needs, the "special design" may be minimal or intensive.

3. Related Services

As stated in the IDEA and the Maine Special Education Regulations, "related services" means:

> "...transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training" (20 U.S.C.1401 (22); 34 C.F.R. § 300.24).

In order for a child with a disability to receive a related service, it must be established that the service is required to assist a child with a disability to benefit from special education. All children, regardless of the severity of their disability, are presumed to have needs that can be addressed by specially designed instruction and are entitled to any related services that will assist the specially designed instruction.

4. Least Restrictive Environment

The IDEA requires special education and related services be provided "to the maximum extent appropriate" in the least restrictive environment (LRE) (20 U.S.C. 1412(a)(5); 34 C.F.R.§ 300.550 (b)(1). LRE uses as a comparison the educational placement the child would be in if she/he had no disabilities. Children with disabilities have the right to attend schools and classes in schools closest to their homes and with children who do not have disabilities. Children with disabilities are removed from these least restrictive settings and placed in a more restrictive environment only when their individual educational needs warrant. LRE is one of

the assurance requirements contained in the state plan which is mandatory if a state is to be deemed eligible to receive federal funding.

In implementing this LRE requirement, school districts or regional CDS sites must make available a "continuum of placements" (34 C.F.R.300.550-.556). This means that a district must operate and/or contract for a wide range of educational settings such as regular education classes, resource classes, public separate day schools, private separate day schools, public residential placements, private residential placements and homebound and hospital placements. It is important to realize that throughout this range of placements, children with disabilities must receive the special education and related services as well as the supplementary aids and services they require. In the IDEA Amendments of 1997, the term supplementary aids and services is defined for the first time (20 U.S.C. 1401(29); 34 C.F.R. § 300.28). Supplementary aids and services are always tied to the child's placement and should be viewed as the devices and services children with disabilities require in order to achieve or most closely approximate the abilities of children who do not have disabilities.

In addition, the LRE requirement must be applied to every school subject and every activity. Educational performance is defined in the Maine Special Education Regulations (§2.7). Schools must consider each piece of the school experience separately. Some children may need supplemental aids and services in order to participate in some academic subjects, lunch, physical education, music, art, assemblies, field trips, or extra curricular activities. Others may not need supplemental aids and services in order to participate in these activities. The child's IEP must state the degree to which the child will be in regular education and what, if any, related services and supplemental aids and services will be provided.

LRE for children birth through five is addressed in Chapter 180,§ 5.

Finally, the supplemental aids and services requirements are extremely important as they relate to assistive technology. The August 10, 1990 Office of Special Education Programs (OSEP) letter confirms the relationship of supplemental aids and services when it expressly states that assistive technology can be considered an LRE factor. As an LRE factor, assistive technology is tied to maximizing the child's ability to be in regular education, and to participate in learning and other activities with children who do not have disabilities (16 EHLR 1317 OSEP, 1990).

5. Staff Development

The IDEA recognizes that in order to be successful, the instructional staff, the administrative staff and the services staff must be aware of the goals of the statute, must be trained appropriately to carry out the goals, and must be aware of and amenable to replicating successful programs in other districts (20 .S.C.§1412(a)(14); 34 C.F.R§.300.380).

The IDEA's staff development requirements are extremely important in regard to assistive technology. One of the most important issues relating to special education is the lack of knowledge about successful programs and a failure to adopt new approaches and techniques. The inclusion of assistive technology service within the IDEA should be read in conjunction with the obligation to provide staff development. Staff development includes training for professionals as an assistive technology service (20 U.S.C. Section 1401(a)(26)). If appropriate, in order to meet the individual educational goals of the child, training in the use and operation of assistive technology for teachers and others working with the child with disabilities such as occupational therapists, speech/language pathologists, physical therapists, peers and/or family can be written into the IEP as an assistive technology service.

6. Procedural Safeguards

The IDEA rejects the practice of school districts or regional CDS sites offering a "one size fits all" with regard to educational programs. All aspects of the educational program for a child with disabilities must be developed according to a set of standardized procedures. This standardized set of procedures applies to all school districts around the country. The appropriate services provided to the child should be the same regardless if the district is a rich, large, urban district or a poor, small rural one. These "safeguards" ensure that a child's educational program will be teaching meaningful skills with recognition of the unique aspects of the child.

Question: Are there provisions in the Americans with Disabilities Education Act (ADA) that support the provision of assistive technology devices and/or services?

Response: One section of the ADA warrants further attention. The ADA regulations specifically mention the obligation of providing assistive technology devices, when necessary, to accommodate an individual with a disability. Title II of the ADA, Public Accommodations, requires public entities to provide auxiliary aids and services

when necessary to eliminate discrimination against individuals with disabilities, unless an undue burden would result. The definition of auxiliary aids and services contained in Title II (28 C.F.R. 35.104) includes the following:

> "a. Qualified interpreters, note takers, transcription services, written materials, telephone handset amplifiers, assistive listening systems, telephones compatible with hearing aids, closed caption decoders, open and closed captioning, TTY's, videotext displays, or other effective methods of making aurally delivered materials available to individuals with hearing impairments.
>
> b. Qualified readers, taped tests, audio recordings, large print and Brailled materials, or other effective methods of making visually delivered materials available to individuals with visual impairments.
>
> c. Acquisition or modifications of equipment or devices; and
>
> d. Other similar services and actions."

In addition, Title II of the ADA states that physical barriers in existing facilities must be removed, if removal is readily achievable. If not, alternative methods of providing the services must be offered, if they are readily achievable.

Question: Are there provisions in Section 504 of the Rehabilitation Act of 1973 that support the provision of assistive technology devices and/or services?

Response: Section 504 of the Rehabilitation Act of 1973 does not specifically include an obligation that school districts provide assistive technology devices or services. Children are not required to be eligible to receive special education services in order to be protected under Section 504. However, Section 504 does require that general education programs provide nondiscriminatory access to all children with disabilities. Children are eligible for Section 504 as long as they meet the definition of a qualified person with a disability. All children with disabilities who are educated under IDEA are also covered by Section 504.

Question: Must local schools and regional CDS sites be accessible for children with mobility impairments?

Response: Yes. One option that is NOT available to schools or regional CDS sites is to send the child with mobility impairments to other districts or CDS sites. On the contrary, school units and CDS sites must place children with mobility impairments in their home districts. If none of the schools in the home district are accessible, modifications to at least one school must be made in order for the child with mobility challenges to be enrolled. For CDS regional sites, the child should be served in the least restrictive environment. The Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act, 1973 require accessible passenger loading areas, designated parking spaces, and an accessible route to the school's entrance. In addition, consideration should be given to accessibility of hallways and interior doorways, bathrooms, water fountains, libraries, gymnasiums, auditoriums and other sites where school activities are held. If one of the classes or programs is available at only one location and that location is not accessible, Section 504 requires that the class or program be moved, or the location made accessible. Section 504 gives schools choices concerning how but not whether physical barriers are removed. Children with mobility impairments do not have to accept lesser academic or non-academic opportunities simply because of mobility challenges.

Question: Are children ages birth to 5 eligible to receive assistive technology devices and services?

Response: Early intervention services, as defined in Part C of IDEA (20 U.S.C. 1400 et seq.), are provided to children ages 0 to 2 years on the basis of a sliding fee scale. Special education services are provided to children ages 3 to 5 years at no cost to the family. In general, if the device meets the legal definition of an assistive technology device and the Individual Family Service Plan (IFSP) or the Individual Education Program (IEP) specifies that the provision of an AT device and/or service is necessary, then the regional Child Development Services (CDS) site is responsible for providing the device and/or service.

Question: What kinds of devices qualify as assistive technology and must be provided for by school districts?

Response: In general, if the device meets the legal definition of an assistive technology device and the IEP specifies that its provision is necessary, for the student to receive FAPE, then school districts are responsible for providing the device. Examples of the types of equipment students might require have been provided in

numerous OSEP letters of clarification. These include but are not limited to eyeglasses (1/13/95), hearing aids (11/19/93), a calculator (4/24/92), an FM auditory system (4/6/92) and a CCTV (11/27/91); these have all been considered an assistive technology device for individual students.

Examples of other types of AT which have been provided to Maine students to accommodate individual educational and learning needs include but are not limited to audio books, verbally described text, display changes with text format, size, spacing and color, Braille, computers, alternative keyboards, trackballs, mouth sticks, touch screen, keyguard, pencil grip, switch, augmentative alternative communication system, text to speech software, spelling and grammar check, talking dictionary, speech to text software and word prediction software.

Question: Must assistive technology devices and services be considered during the development of the Individual Education Program?

Response: Yes. According to the 1999 Maine Special Education Regulations, Chapter 101, as part of the development or revision of each student's IEP, the pupil evaluation team shall consider whether the student requires assistive technology devices and services. Refer to Appendix C for example formats.

Question: How should transportation of assistive technology devices be considered?

Response: When the Pupil Evaluation Team (PET) determines that the student needs to take the assistive technology device(s) out of the school building such as home or to a school activity, the safe transport of the device should be examined and addressed in the student's IEP. When selecting an AT device, transporting the device to and from school should be considered. Refer to Appendix A for specific questions which might be appropriate to ask.

Question: Can school district administrators prohibit personnel from including assistive technology devices and services in the IEP?

Response: No. IEP teams are charged with the responsibility for determining a student's individual need for AT devices and services in order to benefit from his/her education and to have access to the general curriculum. If it is determined that AT devices and/or services are necessary in order for the student to receive FAPE in the least restrictive environment, the IEP must specify the devices and services. If any type of device or service is necessary to insure FAPE for the student, then the

district must provide the required device or service regardless of cost. However, if a less expensive device or service would accomplish the same goals, the IEP team is under no obligation to choose a more expensive option.

Question: How does assistive technology get integrated into the curriculum?

Response: The determination of need for AT devices or services should be made in light of the student's educational strengths and needs. For example, the use of a calculator, a word processor, an adaptation to existing classroom computers, or an augmentative communication aid might be necessary for the student to participate in the regular curriculum, participate in the Maine Educational Assessment (MEA) or to achieve the Maine Learning Results (MLR). Appropriate integration of AT into the classroom enables a student with a disability to perform the same tasks, attain the same learning objectives, and achieve the same educational goals as the non disabled peer.

Question: How and when are decisions made regarding assistive technology and the student's participation in the Maine Educational Assessment (MEA)?

Response: The decision regarding a student's participation in the MEA is made by the Pupil Evaluation Team (PET) during the development of the IEP. These decisions should be made on an individual basis and no decision should be based on general characteristics of children with disabilities or categories of disability. Guidance for making these kinds of decisions is provided in a Maine Department of Education document, *The Policies and Procedures for Accommodations.* This document outlines a variety of possible accommodations but this list is not considered to be an all-inclusive one.

Question: How are assistive technology issues regarding transition considered in guiding the Individual Education Program (IEP) development?

Response: When a child reaches the age of 14, it is important to have individuals on the PET who are knowledgeable about assistive technology and transition issues. While the school environment remains fairly consistent, during transition years the young person often moves from school to community. Assistive technology needs will vary depending on the environment. When considering transition services for young people, the questions to be answered should not be limited solely to areas of academic achievement. An "outcome oriented approach" means that discussion areas include the goals for this individual as he/she reaches adulthood, where the young person is now in reaching that goal, and what will be needed between now

and the time the young person completes high school or ages out to be ready to meet those goals? Examples of the types of questions that the PET might consider include but are not limited to:

- Is the assistive technology needed in the environment?
- Is there a need to modify the assistive technology to reflect changing needs in different environments (i.e., workplace, community)?
- How long will the child be in the environment, and for what purposes (long-term skill development vs. short-term exploratory work experience)?
- Is there a need for additional or different assistive technology?
- Are there transportation issues to be considered? (see question on transportation in this guide on page 21.)
- What are some additional funding sources that provide assistive technology in work and/or community environments?
- Would the child use available short-term loan or demonstration equipment?

See Appendix C for additional considerations.

Question: Are there any places in Maine that offer the opportunity to try out equipment before a purchase is made for a child?

Response: Yes. The Technical Exploration Center of UCP (TEC) is available for its members (individuals, families, educators or employers) to borrow equipment for use at home, daycare, in school, or on the job. Using equipment in customary environments helps to ensure that a piece of equipment is right before making a purchase. For more information contact TEC at (207) 941-2952.

The Maine Center for Assistive Technology and Software (MECATS) at the University of Southern Maine is a preview facility that provides teachers, families and students of all ages and abilities the opportunity to review software and assistive technology devices. MECATS has a fully accessible computer lab for

reviewing software and assistive devices. Videotapes describing how to set up various AT devices are available for loan. In addition, MECATS provides information, professional development and technical assistance. For more information contact MECATS at 207-780-5016 (V/TTY) or 800-800-4876 x5016 (V/TTY), 207-780-5224 Fax or visit their Web site: www.usm.maine.edu/alltech/mecats.

The University of Maine at Farmington (UMF) Center for Assistive Technology is a resource offered free to UMF students, faculty, professionals in the community, individuals with disabilities, and their families. The Center for Assistive Technology provides information about assistive technology (AT), how to use and evaluate various devices, and a place to view AT equipment. Visitors may sign out materials. During the academic year, the Center is staffed by students and operates Monday through Thursday from 1 to 5 p.m. The Center for Assistive Technology is located on the campus of the University of Maine at Farmington in 106 Ricker Addition. For more information contact the Center for Assistive Technology at 207-778-7525 (voice), 207-778-7000 (TTY) (only during academic year) or visit their Web site: www.umf.edu/~sped/at.htm. For information during the academic recess, send e-mail to lspencin@maine.edu.

The Iris Network, formerly known as the Maine Center for the Blind and Visually Impaired, offers hands-on opportunities for children or adults who are blind or visually impaired. Iris Network clients can try out various computer hardware and software options with the assistance of a trained computer access specialist. For more information, contact the Iris Network at 207-774-6273 or 800-715-0097 (v/TTY), 207-774-0679 Fax or visit their Web site: www.The Iris.org.

Question: Can students take assistive technology device(s) home?

Response: If Federal funds are used to purchase the device, then according to EDGAR, the school or regional CDS site owns the device. If state or local education funds are used to purchase the device, then according to state educational financing laws, the school owns the device. If the state Medicaid program or other non-educational third party funder provides the funding for the device, then ownership of the device is interpreted based on existing policy related to the specific source of funding. These facts, however, do NOT determine whether or not the device goes home with the child. To look strictly at ownership as the determining factor as to whether or not the assistive technology device goes home with a child could be viewed as discrimination. After all, school books are owned by the school and students are expected to take them home to do homework and to

study. Why should assistive technology devices be viewed differently from other items considered to be school property?

AT may be necessary for the child to achieve educational benefits. Therefore, a more appropriate question may be to ask how the AT is expected to be used by the child in order to achieve educational benefit. In many instances the AT may be most closely compared to a part of the child's body, substituting for his/her non working or impaired body part or function. Viewed in this way, it becomes obvious that a child would not be expected to leave a part of him/herself at school at the end of the day or during vacations.

If the Pupil Evaluation Team (PET) determines that a particular assistive technology device is required for home use in order for the child to be provided a Free Appropriate Public Education (FAPE), and this is communicated in the Individual Education Program (IEP), then the AT must be provided and allowed to go home in order to implement the IEP (18 IDELR 627,1992). Discussion regarding liability while the device is at home needs to be held and recorded in the IEP. If the device is owned by the school, then the school's insurance policy should be checked to ensure that the AT device is covered.

Question: Can schools require students to bring a family owned assistive technology device(s) to school?

Response: No. There is no barrier to a child bringing his/her AT from home to school, but schools have no authority to mandate that this occur. If the family agrees to allow the device to travel from home to school, then a discussion regarding liability while the device is transported to or is at school needs to be held and recorded in the Individual Education Plan (IEP). If a separate rider is necessary for the device to be covered under the family's insurance, then the school district should reimburse the family for this coverage. The family can and may insist that schools provide the necessary devices as part of the child's IEP even if the child has identical device(s) at home.

Question: Are assistive technology devices and assistive technology services considered medical and therefore not appropriate to consider in educational environments?

Response: Congress identified a wide range of related services in IDEA (20 U.S.C. 1401(22); 34 C.F.R § 300.24) as educationally related. School units are not free to ignore this designation. Once a service or device is determined to be necessary for

a child to benefit from his/her special education program, then the service or device must be provided by the school. The educational/medical distinction ceases to have any relevance or significance once there is a recognition of the connection between the service or device and the child's special education. The only alternative would be for the school to argue that the device or service is not needed at all.

Question: How do schools determine if the assistive technology device(s) constitute best vs. appropriate educational program?

Response: An educational program is "appropriate" when it provides education benefit and an equitable opportunity. This opportunity must be meaningful and equivalent to that offered to other students. More than a minimal benefit is required for the program to be considered appropriate. The IEP must have meaningful benefit to the student which means that it must provide for significant learning. To address if these benefits are appropriate or best, consider what the student's program is before the recommendation for AT is made. Questions to ask include:

Does the student have access to the same instruction and other activities that are available to his/her non disabled peers?

Has the student reached the same level of social maturity, motor development, communication skill, etc. as his/her age peers?

Is the child who is placed in the regular classroom receiving access to the regular curriculum?

Have educational and related service goals been set that will enable the student to achieve the same performance levels as age peers prior to his or her 21st birthday when educational entitlement ends?

AT would be considered best:

If the current level of services provided by the school affords the student the opportunity to develop the same skills to the same degree as his/her peers; or,

If even with assistive technology device(s) and service(s), the student would not be able to develop these skills at a rate or to a degree significantly greater than he/she would without the device(s) and service(s).

If these tenets are false, then assistive technology might be considered appropriate in meeting the educational goals of the student.

Question: Are there resources available to assist me in obtaining the most appropriate assistive technology devices and services?

Response: There are a number of parent, professional and advocacy organizations or associations which are available to offer appropriate assistance regarding assistive technology devices and services. Refer to Appendix B for specific listings.

Question: Do I have any options if the assistive technology device that was purchased does not operate appropriately and/or is constantly breaking down?

Response: Yes. Maine has an assistive technology "Lemon Law" (Title 10MRSA Section 1500-1500F) which covers any type of adaptive equipment or assistive device bought after September 18, 1997 and is used by a person with a disability. This law says that a device may be taken back within thirty (30) days if the device does not do what you need it to do to help you. In addition, the Lemon Law gives a one year warranty period. If the device needs to be fixed within the first year, the company that made the device must fix it at no charge and provide a loaner as soon as practical to do so while the device is being fixed. If the problem persists, the law also contains a mechanism which allows you to return the device to the place where it was purchased and get a refund if desired. For more information on the Lemon Law contact the Disability Rights Center (Appendix B). If you would like a copy of the Lemon Law Fact Sheet, contact the MaineCITE Project.

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Question: How and when are the parents and families involved?

Response: Parents must be given an opportunity to participate in the development of their child's Individual Education Program (IEP) and/or Individual Family Service Plan (IFSP). They should have opportunities for ongoing involvement. Family input can help to shape decisions about the practical use of devices in the home environment and other out of school environments. Additionally, the federal definition for AT services includes the provision of training and technical assistance regarding AT to families when necessary. Make sure that the child's IEP/IFSP clearly states responsibilities of parents, families and schools about providing, maintaining, repairing and replacing equipment.

Question: What are some of the ways that parents and families can work in partnership with schools to ensure the appropriate provision of AT devices and services?

Response: Parents who know that assistive technology will make school life and learning better for their child should work with school administrators, teachers, and related service providers to assure that equitable educational opportunities exist for all children. Planning should begin before the child enters school. Parents should talk with Pupil Evaluation Team (PET) members about the educational use of the equipment that the child needs. Close communication between parents and administrators, teachers, related service personnel and other school personnel is essential to ensure the assistive technology devices and services are used safely and effectively. For example, based on the individual need, the recommendations of the PET for a child who uses an augmentative/alternative communication (ACC) system might include having a wide variety of people in the education setting (i.e. teacher, bus driver, transportation aid, kitchen staff, peer) familiar with the ACC system. PET members and other professionals should assist parents and families in the planning, implementing, evaluating and monitoring of the effectiveness of the use of a child's assistive technology devices and services.

Question: What are the responsibilities of parents, students and educators in the maintenance and repair of equipment and reporting broken equipment?

Response: It is the joint responsibility of the parents, students, and educators to take reasonable care of the device. Families should be responsible for basic maintenance

(i.e., charging batteries) and for reporting broken equipment to the appropriate CDS or public school personnel. Families are not responsible for getting equipment repaired that is specified as necessary in the IFSP and/or IEP. The agency responsible for providing the AT should also be responsible for getting equipment repaired and supplying a substitute or alternative when necessary to ensure delivery of services and providing periodic updates of software.

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Question: Are there prerequisite skills or typical developmental milestones which should be achieved before considering the appropriateness of assistive technology?

Response: Mastery of certain prerequisite skills or typical developmental milestones is generally not necessary in order for children and youth, birth to twenty years of age, to make use of assistive technology. Children with limited vocabulary and/or verbal abilities may benefit from an augmentative, alternative communication system (AACS). An AACS is an electronic or non electronic communication system that assists in overcoming or ameliorating communication limitations. Likewise, children with limited or no use of their hands could benefit from adapted switches which would provide access to a range of possibilities including but not limited to cause and effect toys, word processors, environmental control units which can answer the telephone, turn up the heat, turn on the radio and/or use e-mail and other telecommunication devices and services.

Question: When can an assistive technology evaluation be requested for the child?

Response: An assistive technology evaluation can be requested at any time. It should, however, be requested during the eligibility for services assessment if there is reason to believe that the child could benefit from AT. Indicators of the need for an AT assessment for a child birth to 5 which might be considered include but are not limited to the following:

- Does the child have the ability to play with toys independently? Could AT increase the child's ability to play independently?

- Does the child communicate independently in an effective manner? Could AT increase the child's ability to communicate independently in an effective manner?

- Does the child have the ability to sit independently? Stand independently? Walk independently? Could AT increase the child's ability to stand, walk, and/or sit independently?

- Does the child have the ability to feed independently? Could AT increase the child's ability to feed independently?

Indicators for a child 5 to 20 which might be considered include but are not limited to the following:

- Does the student have the ability to produce written work with the same ease and at a pace similar to that of peers? Could AT increase the student's ability to produce written work with the same ease and pace as that of peers?

- Does the child have the ability to communicate in an age appropriate manner? Could AT increase the child's ability to communicate in a more age appropriate manner?

- Does the child have the ability to sit independently? Stand independently? Walk independently? Could AT increase the the child's ability to stand, walk, or sit independently?

- Does the child require adaptations in order to participate in activities such as art, music or physical education? Could AT increase the child's ability to participate in such activities?

- Does the child have the ability to read at an age appropriate level and at a pace similar to peers? Could AT increase the child's ability to read at an age appropriate level and at a pace similar to peers?

- Do the mechanics of producing work interfere with the quality of the work produced for this student? Could AT assist the student in the mechanics of producing work to increase the quality of the work produced by the student?

Question: Who is qualified to perform an assistive technology evaluation?

Response: Maine presently does not have any established parameters or educational standards defining expertise in AT and no consistency regarding what constitutes such expertise. Some providers, however, have received recognition through national organizations (RESNA, RIATT@NASDSE) that signify that the provider has mastered basic competencies in the area of assistive technology. Qualified providers need to understand aspects of physical, occupational, and speech/language therapy, and be qualified to deliver assistive technology services in a safe and effective manner at appropriate grade level(s) and area(s). In addition,

these individuals need to understand computer hardware and software, educational applications of assistive technology, augmentative communication devices and systems, and other equipment. They need knowledge in education and technology that can be integrated effectively into a child's life in order to support the child's development and education. It is clear that no one person possesses the level of expertise necessary to cover all areas. Therefore, it is imperative for interdisciplinary AT specialists to work collaboratively to ensure maximum benefit of the assistive technology devices and services within the child's customary environments.

Question: What are the components of an assistive technology evaluation?

Response: An AT evaluation should be customized to the child's needs and could include communication, written work, seating, positioning, mobility, behavior, academic and nonacademic concerns, access to the general curriculum, transition services, access to extracurricular activities, software and hardware options, environmental modifications and other issues specific to the student. Evaluation recommendations should reflect needs of the child, family and school personnel.

Question: Where should assistive technology evaluations be performed?

Response: The AT evaluation should be performed in the student's "customary environments." Most children customarily spend their days in school; therefore, the evaluation should occur in the school. Consideration should be given to performing part of the evaluation at home and/or work environments as appropriate to meet the needs of the individual.

Question: How are assistive technology evaluations used in guiding Individual Education Program (IEP) Individualized Family Service Plan (IFSP) development?

Response: AT evaluations serve as the basis upon which an AT intervention would be recommended. The Pupil Evaluation Team (PET) Early Childhood Team (ECT) considers whether an AT evaluation should be done, if one is not already available. If an evaluation is necessary, the team should write it into the IEP/IFSP as an AT service. When the evaluation is completed, the PET/ECT should reconvene to consider the recommendations and make appropriate modifications in the IEP/IFSP. Each school district regional CDS site should document the consideration of AT in the development of the IEP/IFSP. (See Appendix C).

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Question: In addition to the child, who else should receive training on how to use the assistive technology devices?

Response: Use of AT without integration into the child's individual goals and objectives will result in less than optimal outcomes for the child in all environments. Individuals who live, work or play with the child should be a part of this process. For a child with a disability it is not enough to have the classroom teacher or related service personnel (i.e., occupational therapist, physical therapist, speech/language pathologist) be the only ones trained in the use of the device. If the device is to be meaningfully integrated into the child's life and general curriculum, the significant people with whom he/she interacts (family members, peers, etc.) need to be familiar with the assistive technology. Often, very limited instruction is needed. Nonetheless, if these services are needed to help the child meet the IEP/IFSP goals and objectives and benefit from the educational program, the school/regional CDS site is responsible for providing this service.

Question: What kind of training and technical assistance should be provided to families, peers and professionals?

Response: Training will vary depending on the types of AT used by the child. Depending on the technology and on the role of the family, peers and professionals with the child, training and technical assistance should include but not be limited to the following:

- information regarding the device and how it works;
- information about how the device is programmed or set up;
- information about how to recognize and fix minor problems;
- information about how to integrate the device into the child's life at home;
- information about how to integrate the device into the child's education goals and objectives;
- information about maintenance and identification of repair services within the local community.

Question: How does the district provide professional development to staff regarding assistive technology?

Response: The district develops plans for professional development. Persons interested in learning about the application of AT devices and services in the curriculum should contact the local school district special education administrator

for information on available opportunities. National, state and regional workshops, conferences and other training opportunities are offered throughout the year. In some instances, financial support from professional organizations, district funds, or community organizations may be available to attend these trainings. Often personnel within the district gain expertise and can provide in-service training to others. As a result, the district can increase its capacity to meet the needs of teachers and students. In many cases, vendors offer training to professionals and families after a device is purchased. Districts may also support the training of individuals by offering memberships in national organizations that publish newsletters and journals in the area of assistive technology. Additional resources are available on the internet. See MaineCITE's Web site: www.MaineCITE.org or the Maine Center for Assistive Technology and Software: www.usm.maine.edu/alltech/mecats for various links.

Question: How can a staff member receive individualized training for a specific need?

Response: In general, if the IEP team specifies the use of an AT device, then it is the district's responsibility to train appropriate individuals, staff members, peers, and family members, depending on the individual need(s) of the child. In addition to a district-wide professional development plan, special circumstances might arise when it becomes necessary for individuals involved with a specific child to learn how to operate and integrate a device for a specific child. Requests for this kind of specialized training should be made to the school principal and/or the school district's special education administrator. It is the district's responsibility to either bring in a trainer or offer release time, tuition reimbursement, or pay conference fees for staff to get the necessary training elsewhere. If the device is a supplemental aid or service only, extensive training may not be necessary. For example, the use of an FM amplifier in a classroom for a child with hearing impairment would only require a brief introduction to the equipment.

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Question: Are schools required to pay for assistive technology devices and services?

Response: It is the responsibility of the school district to provide for the equipment, services or programs recommended in the Individual Education Program (IEP). Schools should always be mindful, however, that if the assistive technology devices and services appear in the IEP, then the school is responsible for providing for the identified assistive technology need(s). The school district may purchase the equipment, service or programs using federal, state, or local funds. The school district may also choose to access other sources such as Medicaid, Vocational Rehabilitation, the parents, and/or private health insurance policies, to pay for the devices, and services. The following points are critical to remember:

Schools cannot require the parents to pay for an assistive technology device(s) or service(s) identified on a child's IEP.

Schools cannot require parents' health insurance to pay for a child's FAPE.

Schools can use Medicaid to pay for a child's FAPE.

Question: Can schools/regional CDS sites require parents to use their private insurance to pay for necessary assistive technology devices and services?

Response: No. The "free" in FAPE is extremely significant regarding children with disabilities who may require assistive technology devices or services. As stated in IDEA and its regulations, all aspects of the special education and related services must be provided "at no cost to the parents." The term "free" is interpreted broadly and goes far beyond the simple paying of deductibles and copayment. The courts have interpreted "free" to apply to a cadre of parameters including but not limited to: future insurability, depletion of maximum lifetime caps, raised premiums, discontinuation of policy, and preexisting condition exclusions. If the family agrees to allow the school or the regional CDS site to access their private insurance, this decision must be strictly voluntary. (See Chapter 180, § 8)

Question: Can families ever be asked to purchase the devices or augment the identified assistive technology needs of their child?

Response: Yes. Education is a shared responsibility between school, families, employers, and community. Schools develop relationships with families and as part of this communication, there are times when parents can be asked what devices or services they could afford to purchase. It is well recognized that assistive devices and services are used across a broad spectrum. These devices and services serve functional as well as educational needs. When viewed in this manner, the possibility of joint funding is entirely appropriate as long as the parents' willingness to share the financial responsibility is voluntary. Even if the family does purchase the assistive technology device, the schools cannot mandate that the device be brought to school. Families can insist that another device be provided for school use. Additional information regarding sharing responsibilities with families can be found in the MaineCITE publication, Parent Guidebook to Assistive Technology or the Special Education Regulations. Copies of both documents are available through the Office of Special Services, Department of Education, 23 State House Station, Augusta, Maine 04333-0023 207-624-6650 (voice)/207-624-6800 (TTY) or www.state.me.us/education/speced/specserv.htm.

Question: Is it necessary to use IDEA, Part B monies to purchase assistive technology devices and services?

Response: Federal dollars may be used to purchase an assistive device, if appropriate, but it is not required. Assistive technology services are an allowable special education expense if these services are provided by a qualified individual as referenced in the Maine State Special Education Regulations §18.3 on page 107. Assistive technology devices may also be purchased and claimed for subsidy under General Purpose Aid but not as an allowable special education cost.

Question: What are some of the additional funding sources that a local school unit regional CDS site might consider utilizing in meeting the assistive technology needs of students with disabilities?

Response: In addition to a variety of federal, state and local educational dollars, there are a number of potential funders that schools/CDS site might consider utilizing in providing the necessary assistive technology devices for children with disabilities. Some of these programs are: The Adaptive Equipment Loan Program (AELP), Medicaid, Cub Care, Vocational Rehabilitation, Private Insurance and the Department of Mental Health Mental Retardation and Substance Abuse Services'

Children's Services. For more complete information including eligibility, age ranges and types of devices and services likely to be considered by these and other programs, consult the MaineCITE publication, *Easy Reference Handbook to Maine Assistive Technology Funders* (www.MaineCITE.org).

Question: Are there other options for schools to consider in lieu of purchasing the assistive technology device?

Response: Yes. There are times when the outright purchase of equipment or devices is not necessary or even advisable. In instances such as these, schools might consider rental or long-term lease/purchase options. Equipment rentals or long-term lease/purchase options are not intended to be less costly than purchase. There are certain advantages worth considering depending on the individual needs of the student. For example, renting equipment might be a reasonable strategy if the child's condition is considered temporary; if the child's condition is expected to improve or deteriorate; or, when it is necessary to try out the equipment before purchase for a student. Long-term leasing or lease/purchase agreements also have potential benefits for schools which include: no obligation on behalf of the school to purchase the device; reduction of obsolete inventory; flexible leasing terms; use of equipment without a lump sum purchase; upgrading of equipment as more improved technology becomes available; and, upgrading of equipment as the student's needs change.

Question: Can schools share the funding responsibilities of providing assistive technology devices and services?

Response: Yes. This practice, while not well developed, is certainly recommended. This practice is especially appropriate for children with disabilities who are expected to be transitioning from birth to five programs (i.e., Child Development Services and HeadStart) or transitioning to adult services such as those which may be funded by Vocational Rehabilitation.

Ownership of the device is an important issue to consider by IEP teams especially during times of transition. The CDS site and the receiving public school may discuss purchase of the device for continued use in the public school, if appropriate.

Question: How can schools share the funding responsibilities of providing assistive technology devices and services?

Response: An excellent example of shared funding responsibilities includes the Memorandum of Understanding (MOU) which was signed between the Maine Department of Education and the Maine Department of Labor. Under the provisions of this agreement, local educators and Vocational Rehabilitation counselors should explore, when appropriate to meet the individual's post secondary aspirations, the "depreciated buy-out" or assistive technology transfer principle which was incorporated into the MOU. In essence this provision allows the school administrative unit to sell the assistive technology which has been used by the student to Vocational Rehabilitation as the individual pursues his/her employment related goals. In fact, if the school does not need or want the AT used by the student for another student, then EDGAR does not prohibit family members from purchasing the AT through a "depreciated buy-out" option. If you would like to explore this option, contact your local special education administrator.

Another example of shared funding includes participation in interdistrict and intradistrict loans of assistive technology devices. These loans are designed to enhance sharing of unused assistive technology between local school units. Upon completion of its inventory on available equipment, schools inside and outside of the district can borrow unused equipment from each other.

Question: Do districts have responsibility to pay for an independent educational evaluation (IEE) regarding AT?

Response: As part of IDEA procedural safeguards, a parent has a right to an IEE at public expense "if the parent disagrees with an evaluation obtained by the public agency" (34 C.F.R. § 300.503(b)). Description of the legal requirements for an IEE are contained in the Maine Special Education Regulations in §9.19 on pages 51-52. This regulation provides that if a parent states that the school district's evaluation is not appropriate, the school administrative unit (SAU) must either pay for the IEE or request a hearing to show that the district's evaluation was appropriate. If the final hearing decision is that the district's evaluation was appropriate, the district is not responsible for the cost of the independent evaluation. Whenever an independent evaluation is obtained at the school district's expense, the criteria under which the evaluation is obtained, including the location of the evaluation and qualifications of the examiner, must be the same as criteria used by the school district. Regardless of who pays for the independent evaluation, the results must be considered in any decision regarding the provision of FAPE to the student.

Question: Are schools responsible for customization, maintenance, repair, and replacement of assistive technology devices?

Response: AT services such as customization, maintenance, repair, and replacement are included as considerations in the acquisition of equipment or devices purchased/provided by the school. It is the responsibility of the school unit to ensure that students who require assistive technology devices also receive the necessary assistive technology services that will make the technology meaningful to the student. This requirement reflects the "individualization" of a specific type of device.

If family owned AT is used by the school, is listed in the Individual Education Program (IEP), and is necessary for providing Free Appropriate Public Education (FAPE), the school unit might also be responsible for maintenance, repair, and replacement. Responsibilities for these services should be identified in the IEP.

Question: Can schools consider personal devices such as hearing aids and eyeglasses as Assistive Technology?

Response: Historically, the U.S. Department of Education has ruled that schools are not required to provide personal devices which a student would require whether or not in school. However, because the definition of AT device does not include this limitation, the U.S. Department of Education has changed its position. It has stated that a hearing aid is covered under the definition of "AT device." Therefore, if the child requires a hearing aid in order to receive FAPE, the school must provide it at no cost to the child or parents, (OSEP Policy Letter to P. Seiler, 20 IDELR 1216 (11/19/93); OSEP Policy Letter to J. Galloway, 22 IDELR (12/22/94)). Similarly, if a student requires eyeglasses in order to receive FAPE, the school must provide the eyeglasses at no cost to the parents, (OSEP Policy Letter to T. Bachus, 22 IDELR 629 (1/13/95)). This same analysis would apply to a pulmonary nebulizer, (see OSEP Policy Letter to Anonymous, 24 IDELR 388 (1/23/96)). The comments to the new regulations also confirm this position, (Federal Register, p. 12540, 3/12/99).

This response is in no way intended to alter the content of § 6.16 of the Maine Special Education Regulations which appears on page 32.

Appendix A

Sample AT-related Questions

Questions to ask about choice options:

What will it accomplish?

What problems will it solve?

What are its limitations?

What are the advantages/disadvantages of this device?

Is it flexible enough to accommodate changes if the child's disability changes?

Is there a way that a "standard" piece of equipment could be modified to meet the need?

Questions on characteristics and features:

Is the general appearance acceptable and desirable?

Is it comfortable and conforming personally and environmentally?

What are the safety features?

How safe is it when thinking about how it's going to be used?

Is it washable?

Can it be used indoors and outdoors?

Will bad weather affect the use and performance?

Does it have special features to make it more/less desirable?

How big is it?

How much does it weigh?

Are size and weight important features?

Questions on availability and purchase:

Is a prescription necessary?

Does the cost affect the ability to acquire it?

Has it been on the market long enough to establish itself?

Are references available from past and present users?

Is it a stock item or does it need to be made to order?

What is the return policy?

What are the conditions of warranty?

Questions on examination and use:

Is there a demonstration available?

Is it possible to rent or borrow this equipment?

Is there an opportunity to see it being used by others?

Has it been field tested?

If the device has been field tested, by whom?

Is the operation complicated beyond user tolerance?

Is user training available from the vendor?

Is training included in the purchase/rental price?

Is technical support available from the vendor?

Questions on wear and maintenance:

What is the normal lifetime expectancy of the device?

What is the frequency of repairs?

What is the required service and maintenance?

Who does the required service and maintenance?

How far will it be necessary to travel to get service or maintenance?

Is there a loaner available during repair periods?

Can the child fix or adjust the device?

Is there someone else who can fix or adjust the device for the child?

Is there adequate, understandable maintenance information available for the child and his/her family?

Technical Questions:

Does the type of electrical system require batteries, battery chargers, AC adapter?

If batteries are required, how expensive are they?

How long are the batteries expected to last?

Does the device use standard components and values (i.e., switches, software, hardware, voltages)?

What is the type of power system (hydraulics, pneumatics)?

What kinds of advantages/disadvantages are associated with its use?

Is the device compatible with other equipment (cords, connectors, attachments, other equipment, machinery, etc.) or methods currently used by the child?

Questions to Consider for the Transportation of Assistive Technology

Will the child be able to carry the device without assistance? If appropriate, what kind of assistance will be necessary?

Does the device have a carrying case and wheels? Are there other options for transportation of the device?

Does the size or weight of the device make the transportation impossible?

Does the home have the necessary electrical outlets and other requirements to operate the device safely and effectively?

Can the device withstand jolts and jars?

Appendix B

Parent, Professional, Advocacy Organizations

Maine Parent Federation
PO Box 2067
Augusta, Maine 04338-2067
207-628-2144 Voice/TTY
800-870-7746 Voice/TTY
207-623-2148 Fax

Disability Rights Center
PO Box 2007
Augusta, Maine 04338-2007
207-626-2774 Voice/TTY
800-452-1948 Voice/TTY
207-621-1419 Fax

C.A.R.E.S.
Client Assistance Program
4 C Winter St.
Augusta, Maine 04330
207-622-7055 Voice/TTY
800-773-7055 Voice/TTY
207-621-1869 Fax

Center for Community Inclusion
The University of Maine
5717 Corbett Hall
Orono, Maine 04469-5717
207-581-1084 Voice/TTY
800-203-6957 Voice/TTY
207-581-1231 Fax

Southern Maine Parent Awareness
886 Main St.
Suite 303
Midtown Mall
Sanford, Maine 04073
207-324-2338 Voice/TTY
800-564-9696 Voice/TTY
207-324 5621 Fax

Maine Administrators of Services for Children with Disabilities
Kennebec Centre
675 Western Avenue
Suite 2
Manchester, Maine 04351
207-626-3380
207-626-3347 Fax

Appendix C

Meeting Individuals' Unique Needs Screening for Assistive Technology

Systematic procedures for identification, evaluation, and individual program planning for assistive technology needs of individuals will assure equitable access to assistive technology solutions. The development and adoption of protocols for addressing assistive technology which have been systematized assure best practices and equal access for all persons throughout the continuum of the system's responsibility.

An *assistive technology (AT) screening tool* provides a systematic method to screen for potential assistive technology solutions for a variety of needs. Screening each individual eliminates the potential for presumptive denial of the need for assistive technology. The following is an example of an assistive technology (AT) screening tool. The *AT Trigger: Screening Documentation for Potential Assistive Technology Needs* was developed in North Dakota for use in schools.

AT TRIGGER: SCREENING DOCUMENT FOR POTENTIAL ASSISTIVE TECHNOLOGY NEEDS

Completion of the following questionnaire will assist in identifying the student's potential need for a consultation regarding assistive technology accommodations and/or evaluation.

Student's Name_____

Date of Referral_____

Age_____ Grade Level_____ Teacher_____

Physical Characteristics
Does the student have physical characteristics which significantly set him/her apart from same age peers (i.e., posture/habits)? ☐ yes ☐ no

Mobility/Gross Motor
Does the student need special assistance to get to and from places? ☐ yes ☐ no

Fine Motor Skills
Does the student have difficulty performing basic age appropriate tasks which require the use of hands? ☐ yes ☐ no

Hearing, Speech, Vision
Does the student have difficulty in hearing, speaking or seeing? ☐ yes ☐ no

Academic
Does the student experience academic difficulties? ☐ yes ☐ no

Recreation and Leisure
Does the student have difficulty participating in playground activities, sports, or other pastimes? ☐ yes ☐ no

Jobs and Vocations
Does the student avoid or have difficulty securing part-time job opportunities? ☐ yes ☐ no

General Health
Does the student need assistance with academic tasks due to problems related to alertness, vitality, stamina, strength, endurance, or independent work skills? ☐ yes ☐ no

Self Help
Does the student need help from anyone in regard to self-help skills, such as eating, dressing, personal hygiene and grooming, or using the restroom? ☐ yes ☐ no

PLEASE COMPLETE THE FOLLOWING SIMILARLY TITLED FOLLOW-UP SECTION(S) FOR EACH YES RESPONSE FROM PREVIOUS PAGES.

AT Trigger: Screening Document for Potential AT Needs

Physical Characteristics	**Yes**	**No**	**N/A**
1. Can the student sit upright while completing tasks at his desk (i.e., not slouched, resting head on desk or hand, etc.)?	☐	☐	☐
2. Can the student participate in and complete classwork regardless of habits (i.e., thumbsucking, chewing on pencils, etc.)	☐	☐	☐
3. Can the student maintain an appropriate posture while seated and actively engaged in a motor task (i.e., key-boarding, cutting)?	☐	☐	☐
4. Can the student participate in playing and running activities without atypical body postures?	☐	☐	☐
5. Can the student sit on floor without assuming asym-metrical postures?	☐	☐	☐
6. Can the student walk independently within the school setting at a rate consistent with that of peers?	☐	☐	☐

Comments: _____

_____

Mobility/Gross Motor	**Yes**	**No**	**N/A**
1. Does the student have the motor skills necessary to get to/from school and/or get around within the school?	☐	☐	☐
2. Can the student participate in physical activities (struc-tured or independent) and navigate within the class-room without tripping or stumbling?	☐	☐	☐

Mobility/Gross Motor (continued)	Yes	No	N/A
3. Does the student climb and descend stairs independently?	☐	☐	☐
4. Can the student participate in physical activities (structured or independent) and navigate within the classroom without tripping or stumbling?	☐	☐	☐
5. Is the student aware of directionality (i.e., right or left, following the flow of traffic)?	☐	☐	☐
6. Is the student able to maintain balance while performing an activity (i.e., putting on boots, getting up from floor)?	☐	☐	☐
7. Can the student carry objects while walking independently?	☐	☐	☐

Comments: _____

_____

Fine Motor Skills	Yes	No	N/A
1. Can the student cut and/or handle scissors independently?	☐	☐	☐
2. Can the student use writing utensils (i.e., markers, paint brush, pencil, crayons) independently?	☐	☐	☐
3. Can the student complete written tasks independently?	☐	☐	☐
4. Can the student copy materials from a book?	☐	☐	☐
5. Can the student copy materials from a board?	☐	☐	☐
6. Can the student tie shoes, button, snap, and/or use zippers independently?	☐	☐	☐

(continued)

Fine Motor Skills (continued)	Yes	No	N/A
7. Can the student open doors, turn door knobs or handles, water faucets, pages in a book, and use manipulatives?	☐	☐	☐
8. Can the student keyboard?	☐	☐	☐
9. Can the student draw, form letters, stay on the line, and/or trace?	☐	☐	☐

Comments: _____

_____

Hearing, Speech, Vision	Yes	No	N/A
1. Does the student speak to communicate?	☐	☐	☐
2. Are others in the school environment able to understand the student's speech?	☐	☐	☐
3. Does the student respond appropriately to speech and noises in the environment?	☐	☐	☐
4. Is the student able to see printed materials presented in the classroom?	☐	☐	☐
5. Is the student able to see toys/objects in the classroom environment?	☐	☐	☐
6. Is the student able to transfer information from a book, chart, and/or chalkboard to paper?	☐	☐	☐

Comments: _____

_____

Academic	Yes	No	N/A
1. Does the student understand the basic cause/effect?	☐	☐	☐
2. Does the student exhibit choice making skills?	☐	☐	☐
3. Does the student have the attention span needed to handle school/daily living tasks?	☐	☐	☐
4. Does the student have the sequencing skills necessary to accomplish school/daily living tasks?	☐	☐	☐
5. Does the student have the memory and problem solving skills necessary to accomplish school/daily living tasks?	☐	☐	☐
6. Can the student visually track along a line of print?	☐	☐	☐
7. Can the student read texts independently?	☐	☐	☐
8. Can the student write legibly at a reasonable rate in a reasonable time?	☐	☐	☐
9. Can the student write legibly?	☐	☐	☐
10. Can the student accomplish written tasks?	☐	☐	☐
11. Can the student spell enough of the words needed to communicate in written form?	☐	☐	☐
12. Can the student perform math tasks needed for school or for daily living?	☐	☐	☐
13. Can the student take notes at the level needed in school and/or daily living?	☐	☐	☐

Comments: _____

_____

Recreation and Leisure	Yes	No	N/A
1. Is the student able to use the playground equipment?	☐	☐	☐
2. Is the student able to participate in group recreational activities, such as sports and group games?	☐	☐	☐
3. Is the student able to take part in activities requiring fine motor skills, such as board games, art, etc.?	☐	☐	☐
4. Is the student able to participate in extra-curricular activities, such as clubs?	☐	☐	☐

Comments: _____

_____

Appendix C (continued)

IEP Considerations

IEP TEAM CONSIDERATION OF ASSISTIVE TECHNOLOGY

IDEA '97 requires that IEP teams "consider whether the child requires assistive technology devices and services." This means that all teams need to address whether assistive technology is required for the child to benefit from FAPE. It goes on to suggest that the team needs to determine what type of device(s) and/or service(s) is required to benefit from FAPE. If Assistive Technology is determined by the team to be necessary to provide the child FAPE, it must be provided at no cost to parents. Districts must provide AT necessary to provide FAPE, not necessarily the "best" AT.

However, it is not realistic to assume that IEP teams will consider the 20,000 plus assistive technology devices available for every student. But such considerations should also not be restricted to a handful of assistive technology devices known to the IEP team members. IDEA '97 defines assistive technology devices and services as follows:

ASSISTIVE TECHNOLOGY DEVICE: The term "assistive technology device" means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of a child with a disability.

ASSISTIVE TECHNOLOGY SERVICE: The term "assistive technology service" means any service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device.

Such term includes-

A) the evaluation of the needs of such child, including a functional evaluation of the child in the child's customary environment;

B) purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by such child;

C) selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices;

D) coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;

E) training or technical assistance for such child, or, where appropriate, the family of such child, and

F) training or technical assistance for professionals (including individuals providing education and rehabilitation services), employers or other individuals who provide services to employ or are otherwise substantially involved in the major life functions of such child.

Ideally, IEP teams should consider a full range of assistive technology devices and services that are available to address the developmental, instructional and access needs of students.

The following forms are designed to provide IEP teams with a conceptual framework for assistive technology considerations that will be neither too expansive or restrictive. In addition, the forms provide an option for documenting assistive technology considerations to satisfy the IEP requirements of IDEA. The forms are organized into the areas of:

reading	writing	access to educational programs
math	listening	orientation/mobility/ambulation
study skills	speech/language	daily living/recreation/leisure
transition		

If a student has instructional, developmental or access needs in one or more of these areas, the IEP team can use the corresponding form(s) to assist in their consideration of a variety of assistive technology devices and services to address that area. The forms provide space to document both affirmative and negative decisions about the need for assistive technology by area. The team can use the forms to indicate that a general type of assistive technology is included in the IEP and then specify more detail in the IEP. The team can also use the forms to document that assistive technology is not needed by noting that other interventions and/or adaptations are to be used to address the student needs in that area. For students whose IEP only addresses one problem (such as speech), the form for that area could simply be attached to the IEP as documentation of the

special factor consideration. For students with an IEP that addresses many areas, the documentation will be more lengthy, but the appropriate forms could still be attached to the IEP.

While the forms do not provide an all-inclusive list of assistive technology for an area, they do provide IEP teams with an idea of the range of AT that can and should be considered to address various needs. The lists do not include instructional software or other similar electronic media and materials that might be used to teach skills or remediate skill deficits in an area. Such technology is far too expansive to include in a list and is typically considered to be part of general instructional media, like textbooks and other materials that all students use to learn.

These forms can and should be used in conjunction with a structured decision-making process, for example, the SETT framework describes team consideration of the Student (S), Environment (E), Tasks (T), and finally Tools (T) in making decisions about assistive technology. The tools include assistive technology along with non-technology tools that could be used to address needs. These lists could be used within a SETT decision-making process to assist teams to consider an appropriate range of assistive technology tools, especially if their own experience with assistive technology is somewhat limited.

While these lists are not meant to be inclusive of every possible assistive technology device a student might need, when used with a good decision-making process, they can encourage appropriate depth and breadth of considerations along with a consistent procedure for documentation.

☐ READING is addressed in the IEP. Consider assistive technology that:	
Enhances standard text and graphics ☐ Included in IEP	• corrective lenses (eyeglasses) (Only required to be purchased by the school if school determines child needs this item to receive FAPE and child's IEP specifies the need.) • highlighting • colored overlays • manually or electronically changing spacing • screen color/contrast adaptations • pictures/graphics • symbols/sign language cues
Enlarges text and graphics ☐ Included in IEP	• large print books • manual hand-held magnifiers • closed circuit television (CCTV) • screen magnifier (placed over computer screen)/large printer • screen enlarging software
Converts text and graphics to speech ☐ Included in IEP	• talking dictionary (to "pronounce" difficult words) • tape recorded or talking books • "talking" word processor (to "read" specific words or all electronic text) • screen reading system (to "read" text–may need to be scanned into electronic format) • video description (verbal description of visual information conveyed in videotapes, TV, etc.)
Converts text and graphics to Braille or other tactile symbols ☐ Included in IEP	• Braille translation software and Braille printer • refreshable Braille computer output • tactile graphic display systems (NOMAD, etc.)
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professionals/ paraprofessionals
Assistive technology is not included in the IEP. Reading needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	

☐ WRITING is addressed in the IEP. Consider assistive technology that:	
Enhances standard writing utensils and supports ☐ Included in IEP	• adaptive grip, larger size, wide marking or other adapted writing utensil • splints, wrist supports, etc. • special paper (wider lines, raised lines, etc.) • writing guides, signature guides, etc. • slanted, larger, or no-slip writing suface
Replaces standard writing utensils and supports with alternative ☐ Included in IEP	• typewriter • electronic notetaker, portable word processor with standard keyboard (AlphaSmart, Type N Speak, etc.) • electronic notetaker with Braille input • computer with standard keyboard/pointing device • computer with keyboard enhancements or adjustments (keyguard, repeat rate adjustments, etc.) • computer with alternative keyboard/pointing device (on-screen keyboards, adaptive keyboards, trackballs, keyboard emulation) • computer with switch, scanning, code or other alternative direct selection input device • word prediction and macros to reduce keystroke input • computer with voice dictation input
Enhances the composition of written expression ☐ Included in IEP	• dictionary and thesaurus (print or electronic, electronic may be "talking") • word processing with spell checker, grammar checker, etc. (may be talking) • abbreviation/expansion and word prediction (to facilitate composition content and input speed) • voice dictation input (to facilitate composition content and input speed) • multi-media software (to facilitate expression through multiple sensory channels)
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professionals/paraprofessionals
Assistive technology is not included in the IEP. Writing needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	

☐ MATH is addressed in the IEP. Consider assistive technology that:	
Replaces mental calculations with mechanical or electronic ☐ Included in IEP	• abacus • calculator with print output • "talking" calculator with speech output • calculator with large print LCD display • calculator with large keypad • "on screen" calculator with computer input and/or output adaptations
Adapts measuring devices (ruler, thermometer, clock, watches, etc.) ☐ Included in IEP	• measuring devices with speech output • measuring devices with large print or LCD display • measuring devices with tactile output
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/ paraprofessionals
Assistive technology is not included in the IEP. Math needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	
☐ STUDY SKILLS are addressed in the IEP. Consider assistive technology that:	
Enhances or supplements study and organizational skills ☐ Included in IEP	• picture or picture schedule • visual organizers (color coded tabs and folders, color coded high lighters, etc.) • electronic organizers • speech output devices that provide verbal reminders for assignments, sequence of task, etc. • software to support organization of ideas and studying
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professionals/paraprofessionals
Assistive technology is not included in the IEP. Study skills are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	

☐ SPEECH/LANGUAGE or ORAL EXPRESSION is addressed in the IEP. Consider assistive technology that:	
Enhances speech production ☐ Included in IEP	• speech amplifier • speech "clarifier"
Supplements/replaces speech production with text, pictures, or graphics that communicate ☐ Included in IEP	• communication board/book • typewriter • text display or print output electronic notetaker, portable word processor, computer, or communication device
Supplements/replaces speech production with alternative speech ☐ Included in IEP	• artificial larynx • tape recorded speech output communication devices with variable input options and range of number of messages that can be recorded, stored and retrieved • computer generated speech output communication devices with variable input options and text to speech capacity
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/paraprofessionals
Assistive technology is not included in the IEP. Speech/language needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	
☐ LISTENING is addressed in the IEP. Consider assistive technology that:	
Enhances sound and speech reception (amplifies and/or reduces background noise) ☐ Included in IEP	• hearing aid (Only required to be purchased by the school if school determines child needs this item to receive FAPE and child's IEP specifies need.) • cochlear implant • assistive listening systems (e.g. FM, infrared, induction loop, etc.)
Converts speech to text ☐ Included in IEP	• captioning of videotapes and TV • computer assisted real-time captioning (CART) • computer assisted notetaking (CAN)
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professionals/paraprofessionals
Assistive technology is not included in the IEP. Listening needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	

■ ORIENTATION, MOBILITY, OR AMBULATION is addressed in the IEP. Consider assistive technology that:	
Enhances orientation, mobility, or ambulation function ☐ Included in IEP	• corrective lenses (eyeglasses) • white cane/electronic sensor cane devices • auditory location signaler systems • tactile signage • grab bars, lever handles, etc. • door openers • splints, canes, walkers, stair glides, ramps, etc. • speech output devices that provide verbal directions
Supplements/replaces orientation, mobility, or ambulation function ☐ Included in IEP	• remote environmental controls • manual or power wheelchair • power mobility device (scooter, toy car, etc.)
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/ paraprofessionals
Assistive technology is not included in the IEP. Orientation, mobility, ambulation needs are addressed by: ☐ Instructional and/or therapeutic intervention to remediate skill deficits ☐ Instructional and/or therapeutic intervention to develop compensatory skills ☐ Adaptation of tasks and/or task expectations ☐ Use of human assistance (paraprofessional, peer assistance, etc.)	

☐ DAILY LIVING or RECREATION/LEISURE is addressed in the IEP. Consider assistive technology that:	
Enhances or supplements development of daily living skills or leisure activities ☐ Included in IEP	• adapted eating utensils (e.g. built-up handles, plate guards, straws) • adapted dressing aids (e.g. button holers, sock guides, velcro closures) • adaptive watches, adaptive clocks and alarms • environmental control units • adaptive driving equipment (e.g. hand controls) • adapted toys, board games, playing cards, etc. • "beeping" balls, bases, frisbees, etc. • lane guides for track and swimming • adjustable basketball hoops, wheelchair spoke guards, accessible weight training equipment, hand cycles, etc.
Replaces human functions to allow activity accomplishment ☐ Included in IEP	• feeding systems • transfer systems
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/ paraprofessionals

Assistive technology is not included in the IEP. Daily living needs are addressed by:

- ☐ Instructional and/or therapeutic intervention to remediate skill deficits
- ☐ Instructional and/or therapeutic intervention to develop compensatory skills
- ☐ Adaptation of tasks and/or task expectations
- ☐ Use of human assistance (paraprofessional, peer assistance, etc.)

☐ ACCESS to educational programs (developmental, academic, functional, vocational, or transition) is addressed in the IEP. Consider assistive technology that:

Provides equal access to curricula, media and instruction ☐ Included in IEP	• adaptive toys (e.g. switch activated, etc.) • page turners, electronic format of print pages/books • alternative format print materials (large print, Braille, electronic, etc.) • adjusted or alternative input and output for computers, electronic, and online media • telephone access (TTY, VCO, amplified phone, etc.) • adjusted or alternative output for audio-visual media (captioning, video description, amplified audio output, magnified video output, etc.)
Provides equal access to the education environment ☐ Included in IEP	• physical accessibility of buildings, restrooms, classrooms, library, work space, desks, etc. • emergency signaling systems (visual fire alarms, etc.) • alternative signage (raised lettering, Braille)
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/ paraprofessionals

Assistive technology is not included in the IEP. Daily living needs are addressed by:

- ☐ Non-technology adaptation of curricula, media and instruction
- ☐ Adaptation of tasks and/or task expectations
- ☐ Use of human assistance (paraprofessional, peer assistance, etc.)

■ TRANSITION is addressed in the IEP. Consider assistive technology that:	
Enhances or develops independent living skills. (See daily living.) ☐ Included in IEP	(See daily living.)
Needed for post secondary education, employment ☐ Included in IEP	• transfer of device ownership to student/VR • accessible testing
Enhances employment skills ☐ Included in IEP	• adaptive transportation, home/workplace modifications • public transportation, orientation
Involvement of VR ☐ Included in IEP	• testing, training, education, job coach
Provides assistive technology services ☐ Included in IEP	• training on technical assistance for individuals • training on technical assistance for families • training on technical assistance for professional/ paraprofessionals

Assistive technology is not included in the IEP. Needs are addressed by:

- ☐ Instructional and/or therapeutic intervention to remediate skill deficits
- ☐ Instructional and/or therapeutic intervention to develop compensatory skills
- ☐ Adaptation of tasks and/or task expectations
- ☐ Use of human assistance (paraprofessional, peer assistance, etc.)

Cite